



PATENT
Docket No. C 2534 PCT/US

receipt
TFW
1616

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of Pauly, et al.

Serial No. 10/506,315
Filed: 04/14/2005
TITLE: USE OF SUGAR ESTERS IN COSMETIC AND/OR
PHARMACEUTICAL PREPARATIONS

Examiner: Unknown
Art Unit: 1616

REQUEST FOR CORRECTION OF FILING RECEIPT

Office Of Initial Patent Examinations
Customer Service Center
Commissioner of Patents and Trademarks
P. O. Box 1450
Alexandria, VA 22313-1450

February 2, 2006

Sir:

We hereby request correction of the Filing Receipt for Serial No. 10/506,315.

The names of the second, third, fourth and fifth inventors were omitted from the filing receipt. Please insert the following information after the first named inventor but before the sixth and last inventor named as follows:

Gilles Pauly, Nancy, FRANCE;
Olga Freis, Seichamps, FRANCE;
Louis Danoux, Saulxures Les Nancy, FRANCE;
Veronique Gillon, Essey-les-Nancy, FRANCE;
Philippe Moussou, Nancy, FRANCE;
Philippe Grisoni, Bey sur Seille, FRANCE

The **Foreign Applications** information in the above-referenced application is missing and should be added as follows:

EUROPEAN PATENT OFFICE (EPO) 02290508.7 03/01/2002

We thank you for your assistance in this matter.

Respectfully submitted,

Daniel S. Ortiz
(Reg. No. 25,123)
Attorney for Applicants
(215) 628-1141

Cognis Corporation, Patent Dept.
300 Brookside Avenue
Ambler, PA 19002

Enclosures:

- 1) Filing Receipt (copy)
- 2) Executed Declaration (copy)



ARE/RS

UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/506,315	04/14/2005	1616	1050	C 2534 PCT/US		13	1

CONFIRMATION NO. 8331

23657
COGNIS CORPORATION
PATENT DEPARTMENT
300 BROOKSIDE AVENUE
AMBLER, PA 19002

FILING RECEIPT



OC000000016067996

Date Mailed: 05/20/2005

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

X Gilles Pauly, Nancy, FRANCE;
Philippe Grisoni, Bey sur Seille, FRANCE;

Olga Freis, Seichamps, FRANCE
Louis Danoux, Saulxures Les Nancy, FRANCE
Veronique Gillon, Essey-les-Nancy, FRANCE
Philippe Moussou, Nancy, FRANCE

Power of Attorney: The patent practitioners associated with Customer Number 23657.

Domestic Priority data as claimed by applicant

This application is a 371 of PCT/EP03/01731 02/20/2003

Foreign Applications

X EUROPEAN PATENT OFFICE (EPO) 02290508.7 03/01/2002

Projected Publication Date: 08/25/2005

Non-Publication Request: No

Early Publication Request: No

Title

Use of sugar esters in cosmetic and/or pharmaceutical preparations

Preliminary Class

RECEIVED COGNIS LAW DEPT.
ACTION _____ INFO _____

MAY 27 2005

DUE _____
FILE C 2534

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Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15**

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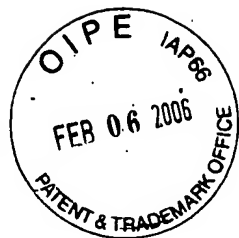
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PTO/SB/01 (6-95)

Approved for use through: 10/31/98 OMB 0651-0032

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95		U.S. Department of Commerce Patent and Trademark Office		Attorney Docket Number	C 2534 PCT/US
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION				First Named Inventor	PAULY, Gilles
				COMPLETE IF KNOWN	
				Application Number	10/506,315
				Filing Date	04/14/2005
				Group Art Unit	
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing				Examiner Name	

As a below named inventor, I hereby declare that:
My residence, post office address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

USE OF SUGAR ESTERS IN COSMETIC AND/OR PHARMACEUTICAL PREPARATIONS
(Title of the Invention)

the specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) 02/20/2003 as United States Application Number or PCT International

Application Number PCT/EP03/01731 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority	Certified Copy Attached?	
			Not Claimed	YES	NO
02290508.7	EP	03/01/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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C 2534 PCT/US

DECLARATION**Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365 of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP03/01731	02/20/2003	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

OR

☒ List Attorney(s) and/or agent(s) name and registration number below:


Name	Registration Number	Name	Registration Number
Steven J. Trzaska	36,296		
Aaron R. Ettelman	42,516		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number ☐ or label **23657** OR ☐ Fill in correspondence address below

Name	Aaron R. Ettelman				
Address					
Address					
City		State		Zip	
Country		Telephone	215-628-1413	Fax	215-628-1345

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Gilles	Middle Initial		Family Name	Pauly
Inventor's Signature				Date	7/1/08/09
Residence: City	Nancy	State		Country	France
Post Office Address	5, rue de Begonias				
Post Office Address					
City	54000 Nancy	State		Country	France
Applicant Authority					


☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box → ☐

C 2534 PCT/US

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Olga			Middle Initial		Family Name	Freis			Suffix e.g. Jr.			
Inventor's Signature							Date	31.08.04					
Residence: City	Selchamps			State		Country	France			Citizenship	France		
Post Office Address	10, avenue des Heleux												
Post Office Address													
City	54280 Selchamps			State		Zip		Country	France			Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Louis			Middle Initial		Family Name	Danoux			Suffix e.g. Jr.			
Inventor's Signature							Date	31 Août 2004					
Residence: City	Saulxures Les Nancy			State		Country	France			Citizenship	France		
Post Office Address	12, rue de Bretagne												
Post Office Address													
City	54420 Saulxures Les Nancy			State		Zip		Country	France			Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Veronique			Middle Initial		Family Name	Gillon			Suffix e.g. Jr.			
Inventor's Signature							Date	31/08/2004					
Residence: City	Essey-les-Nancy			State		Country	France			Citizenship	France		
Post Office Address	73 bis, rue Roger Berin												
Post Office Address													
City	54270 Essey-les-Nancy			State		Zip		Country	France			Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Philippe			Middle Initial		Family Name	Moussou			Suffix e.g. Jr.			
Inventor's Signature							Date	30/08/2004					
Residence: City	Nancy			State		Country	France			Citizenship	France		
Post Office Address	14, rue de Marsal												
Post Office Address													
City	54000 Nancy			State		Zip		Country	France			Applicant Authority	
<input checked="" type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto												

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name	Philippe			Middle Initial			Family Name	Grisoni			Suffix e.g. Jr.			
Inventor's Signature							Date	31/08/04						
Residence: City		Bey sur Selles			State		Country		France		Citizenship		France	
Post Office Address		29, rue Principale												
Post Office Address														
City		54760 Bey sur Selles			State		Zip		Country		France		Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.			
Inventor's Signature							Date							
Residence: City					State		Country				Citizenship			
Post Office Address														
Post Office Address														
City					State		Zip		Country				Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.			
Inventor's Signature							Date							
Residence: City					State		Country				Citizenship			
Post Office Address														
Post Office Address														
City					State		Zip		Country				Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.			
Inventor's Signature							Date							
Residence: City					State		Country				Citizenship			
Post Office Address														
Post Office Address														
City					State		Zip		Country				Applicant Authority	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.			
Inventor's Signature							Date							
Residence: City					State		Country				Citizenship			
Post Office Address														
Post Office Address														
City					State		Zip		Country				Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto														